PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

80508 101

Elicolivo Golobel 1, 2000												
		CLAIMS AS	S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			18				RA	ΓE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			\\(\frac{1}{2} \) minus 20=		*		X\$	9=		OR	X\$18=	
INDEPENDENT CLAIMS			\		* \		X4:	3=	43	OR	X86=	
MULTIPLE DEPENDENT CLAIM P			RESENT	17			+14	5=	1,0	OR	+290=	
* If the difference in column 1 is			less than zero, enter "0" in co			column 2	TOI	AL	he8.	OR	TOTAL	
	С	LAIMS AS A	MENDED - PART II						M C G	3	OTHER	THAN
		(Column 1)		(Colun	nn 2)	(Column 3)		SMALL ENTITY		OR	SMALL	ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID	BER DUSLY	PRESENT EXTRA	RA ⁻	ſΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	*	Minus	**	·	=	X\$	9=	1	OR	X\$18=	
	Independent	*	Minus	***		=	X40	}=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+14	5=	,	OR	+,290=	
								TAL			TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								FEE			ADDII. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	EST BER DUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=	X\$ 9)=		OR	X\$18=	
	Independent	*	Minus	***		=	X43	=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+14	5=		OR	+290=	
								TAL FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGHI NUME PREVIC PAID I	EST BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .	X\$ 9)=		OR	X\$18=	
	Independent	*	Minus	***		=	X43	_		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	\dashv		On		
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												